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Substitute for form		Complete if Known				
		Application Number				
INFORM	ATION DISCLOSURE	Filing Date				
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	ENT BY APPLICANT	Art Unit				
(Use a	s many sheets as necessary)	Examiner Name				
Sheet 1	of 1	Attorney Docket Number	DE 020232			

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Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan Figures Appear
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Examiner Signature	/James Sheleheda/	Date Considered	02/01/2008	

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Complete if Known				
Application Number	10/531,022			
Filing Date	April 12, 2005			
First Named Inventor	Adras Montvay			
Art Unit	2611			
Examiner Name				
Attorney Docket Number	DF 020232			

U. S. PATENT DOCUMENTS Name of Patentee or **Document Number Publication Date** Pages, Columns, Lines, Where Initials* MM-DD-YYYY Applicant of Cited Document Number-Kind Code^{2 (il known)} Figures Appear ^{US-} 5,748,259 /J.S./ 1 05/05/1998 ALL Kang US US-US-US-US-US USiis. ŪS-US-US-HS. US-UŞ-US US US-US-

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
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